## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

· · Karl Kazmaier

## Mar 05, 2004 8:00 am **Secretary of State** DOCUMENT # N40543 03-05-2004 90014 041 \*\*\*\*61.25 COCO PLUM TERRACES CONDOMINIUM ASSOCIATION, Principal Place of Business Mailing Address 107 AVE D 107 AVE D 44015560 OFFICE 215 OFFICE 215 MARATHON, FL 33050 MARATHON, FL 33050 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012004 Cha-NP CR2E037 (10/03) Applied For . City & State City & State 4. FEI Number 65-0348369 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAO, JOHN Street Address (P.O. Box Number is Not Acceptable) 105 Avenue "D" #107 8811 NW 8TH ST PEMBROKE PINES, FL 33024 Zip Code 3050 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Ed Fischer SIGNATURE ... Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. PD TITLE X Octobe TITLE PD Gazmaier, Karl 4244 Colony Club CHRISTY, DAVID M NAME NAME STREET ADDRESS 1125 JAMES AVE STREET ADDRESS Port Clinton, Oh. 43452 NIAGARA FALLS, NY 14305 CITY-ST-ZIP CITY-ST-ZIP TITLE TD TITI F Addition: Delete BASWELL, PALMER MAME NAME Bagwell, Palmer STREET ADDRESS 1884 PINE TRAIL ROAD STREET ADORESS 1884 Pine Tr. East Tawas. EAST TAWAS, MI 48730 CITY-ST-ZP CITY-ST-ZIP 48730 VD XDI Delete TITLE XIX Change **5**d Addition TITLE TERRYL, DAVID NAME Burton, Richard NAME STREET ADDRESS 820 CLUBHOUSE RD - #4F STREET ADDRESS 959 Capstan Dr. CITY-ST-ZIP NORTH LIBERTY, IA 52317 CITY-ST-ZIP Forked River, NJ 08731 DILE XX Delete TITLE KI Change **Addition** JOHNSON, RONALD P Schmidt, Patricia NAME MASSE 2878 SE WILTSHIRE TERR STREET ADDRESS STREET ADDRESS 1864 N. US 23 CITY-ST-ZIP PORT ST LUCIE, FL 34952 CITY-ST-ZIP ast Tawas. TITLE ☐ Delete TITLE Change Addition NAME Reese, Thomas 2 Buffalo Ave. STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition TITLE NAME MALE STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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